

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF	Jimmie Lewis	COURT CASE NUMBER	CA NO. 05-013 GMS
DEFENDANT	MS. NEWMAN	TYPE OF PROCESS	O/c
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN → MS NEWMAN IS A C/O AT THE HR VCI		
AT	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 1301 E. 12TH ST WILM, DE 19809		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:		Number of process to be served with this Form - 285	4
Jimmie Lewis, SB# 506622 Del. CORRE CENTER. 1181 PADDOCK RD SMYRNA, DE 19971		Number of parties to be served in this case	44
		Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
Fold

COMPLAINTS ARE DATED: 2/18/06, 3/29/05,
(PORMA PAUPERIS) 1/6/05, 10/3/05

Fold

Signature of Attorney or other Originator requesting service on behalf of: <i>Jimmie Lewis</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER N/A	DATE 7/17/06
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Proeess	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk <i>BF</i>	Date 10-4-06
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I hereby certify and return that I have personally served, I have legal evidence of service, I have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

<input checked="" type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)	Name and title of individual served (if not shown above) <i>MS. NEWMAN</i>		A person of suitable age and discretion then residing in the defendant's usual place of abode. <input type="checkbox"/>	
Address (complete only if different than shown above)			Date of Service 10/5/06	Time 9:00 am pm
Signature of U.S. Marshal or Deputy <i>BF</i>				

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS: Out on extended Sick leave pending
Retirement - Return unexpected
2006 OCT - 6 AM 8:51

CLERK U.S. DISTRICT COURT
DISTRICT OF DELAWARE
FILED